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CITY OF WINNIPEG

HEALTH DEPARTMENT

ANNUAL REPORT
of the
Medical Health Officer

Year
1959

R.G. Cadham, M.D., D.P.H.

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CITY HEALTH DEPARTMENT

Winnipeg, 1960

Chairman and Members,
Committee on Public Health and Welfare.

Madam and Gentlemen:

I have the honour to present the annual report and the financial statement of the Health Department for the year 1959.

For the citizens of Winnipeg, the year 1959 was one of the most healthful for a considerable period. No large outbreak of any major infectious disease occurred, indeed, the usual waves of frequently unknown types of minor infection which periodically sweep through the population and cause considerable absenteeism from work or school, failed to appear. There was a marked reduction in the incidence of scarlet fever. For the first time since 1926 no cases of poliomyelitis were reported. There was an increase in the incidence of infectious hepatitis which is common to all other centres in Canada. There were 74 deaths from carcinoma of the lung - the incidence of this disease is showing a progressive increase. There was a minor outbreak of Asian Influenza confined to one institution. Six cases of typhoid fever occurred as a result of an unknown carrier participating in the preparation of food for a small Sunday School class party. Fortunately the carrier was quickly discovered.

Dr. J. B. Morison returned to take up his duties as the Deputy Medical Health Officer in June following the completion of his post-graduate course in Public Health and Preventive Medicine. Positions for the employment of two full time Dental Officers were established bringing our establishment for dentists equivalent to 4½ full time dentists. This allowed for a considerable increase in the work done by the Child Dental Health Services. The establishment for Public Health Nurses was increased

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by one, which now provides us with a total of 56 Public Health Nurses.

The Department continued with an extremely active immunization program for all age groups. During the year the fourth or booster dose of poliomyelitis vaccine was given to approximately 60,000 school children. In addition, there were some 22,000 inoculations given in the Child Health Centres to infants and pre-school children, for protection against diphtheria, whooping cough, tetanus, poliomyelitis and smallpox. A monitoring service of minor viral diseases which occur in the city from time to time was established by introducing a reporting system of all minor illnesses in the school population followed by examination of appropriate specimens for the identification of specific viruses.

For many years the Board of Parks and Recreation has operated some 36 wading pools of the fill and draw type. Throughout the summer, attempts were made to control the pollution of this type of wading pool by the manual addition of a chlorine solution. Bacteriological testing of samples proved that pollution could not be controlled by this method. As a result of this investigation, all wading pools were ordered to be closed late in August and they will not open until adequate measures to control pollution in wading pools have been adopted.

The Health Department continued with the supervision of nursing homes and the provision of medical care for nursing home patients who are the financial responsibility of the City of Winnipeg. In the last four years there has been an increase of 21% in the monthly average number of patients for whom the City Health Department is responsible from 488 patients in 1956 to 591 patients in 1959. The problem of insuring that the proprietory nursing homes are meeting all the requirements of the by-law to insure adequate nursing supervision, dietary intakes, space requirements, staff requirements, and the details of the by-law, requires constant

vigilance. There is an urgent need for more chronic disease beds operated by non-profit organizations.

A forward step was the introduction by City Council (to be effective January 1, 1960) of an amendment to the Health By-law of the City of Winnipeg to control the use of incinerators. The intent of this amendment was to reduce as far as possible the degree of air pollution in the City.

It is of interest that the nuisance created by pigeons has been very adequately controlled by the simple method of employing an individual, who is a skilled marksman, and has the permission of the Chief of Police, to shoot pigeons early in the morning where they are creating a nuisance. Since the introduction of this method of pigeon control approximately 18 months ago, over 6,000 pigeons have been shot and there no longer exists a long unabated list of individuals with complaints regarding pigeons.

The Housing Division continued an aggressive role in improving living conditions, particularly in run-down rooming houses. The number of establishments seeking liquor permits has increased the inspection work required of the Food Division. The physical standards demanded by the Liquor Control Commission where liquor may be served has improved the facilities in many eating establishments.

In summary, this has been a very satisfactory year and on the following pages are recorded in detail the activities of the Health Department for the year 1959. The support of the Committee on Public Health and Welfare as well as that of other elected representatives to the City Council has been appreciated by myself and all other members of the staff.

Respectfully submitted,

Medical Health Officer

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COMMITTEE ON PUBLIC HEALTH AND WELFARE

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Alderman M. McDiarmid
Alderman J. Coulter
Alderman C. Spence
Alderman J. Penner
Alderman S. Rebchuk
His Worship Mayor Juba (ex officio)

STAFF

Medical Health Officer	R. G. Cadham, M.D., D.P.H.
Deputy Medical Health Officer.	J. B. Morison, M.D., D.P.H.
Assistant Medical Health Officer	J. E. Davies, M.B.B.S.
Consultant, Child Care Services	H. Medovy, M.D.
Director - Child Dental Services	C. H. McCormick, D.D.S., D.D.P.H.
Director, Public Health Nursing	Miss L. MacKenzie, R.N., M.A., P.D.
Chief Health Inspector	E. J. Rigby, D.V.M.
Secretary.	E. Singleton

HISTORY

From a Hudson's Bay Company trading post (Fort Garry) in 1870, with a population of 215, Winnipeg has grown to the size and finish of a first-class city of approximately 258,000 people. When the City was incorporated in 1873 there was a population of 1,869.

The present Health Department may be said to date from 1900 when the late Dr. A. J. Douglas was appointed the first full time Health Officer.

From 1881 to 1900 Winnipeg had a series of part time Medical Health Officers.

In 1941 amalgamation with the School Medical Services occurred and the services increased and extended to all child caring institutions in the City without distinction. This applies to Medical, Dental and Nursing Services.

The Child Health Services Board was set up to help the Department in a consultative manner, meetings being held at the call of the Chairman. This Board was replaced in 1955 by a monthly meeting of the administrative Officers of the School Board and the Health Department.

The Department has now several Branches to carry out the provisions of the Public Health Act of Manitoba, the Health By-law of the City and a number of other City By-laws.

AREA AND POPULATION

The City covers a total area of 25 square miles - - land 24.27 square miles (15,723 acres), and water .73 square miles (469 acres). The density of the population is 16.4 persons per acre of land.

For statistical purposes the population for 1959 is 257,898, as determined by the Assessment Commissioner. The natural increase in 1959 (live births less deaths) shows an increase of 3,285.

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VITAL STATISTICS AS REGISTERED IN WINNIPEG, 1959

(Including Non-Residents)

	1959	1958
Live Births	8,956	8,597
Deaths.	2,963	2,858
Infant Deaths	247	223
Stillbirths	104	122
Puerperal Deaths.	5	4

Summary of Vital Statistics, Residents, 1959

		1959	1958
Live Births	Male	3,100	3,034
	Female	2,923	2,858
	TOTAL	6,023	5,892
Rate per 1,000 Population		23.4	23.1
Deaths	Male	1,641	1,490
	Female	1,097	1,076
	TOTAL	2,738	2,566
Rate per 1,000 Population		10.6	10.0
Natural Increase		3,285	3,326
Infant Deaths (-1 year)	Male	84	101
	Female	70	54
	TOTAL	154	155
Rate per 1,000 Live Births		25.6	26.3
Stillbirths	Male	34	42
	Female	38	44
	Sex Undetermined	1	86
		73	
Rate per 1,000 Live Births		12.1	14.6
Puerperal Deaths		2	4
Rate per 1,000 Live Births		.3	.7

(Population - December 31, 1959 - 257,898)

LIVE BIRTHS, RESIDENTS ONLY

Live births occurring to Winnipeg residents during 1959 numbered 6,023 giving a rate of 23.4 per 1,000 population which is a small increase over the rate of 23.0 recorded in 1958. There were 3,100 boys and 2,923 girls born giving a ratio of 1,061 boys to 1,000 girls. First children accounted for 2,233 or 37.1% of the total births, second children 1,617 or 26.8%, third children 1,019 or 16.9%, 5,710 or 94.8% included the fifth child.

INFANT MORTALITY

There were 154 deaths of infants under one year of age in 1959 giving a rate of 25.6 per 1,000 live births. This is a decrease of 2.7% from the rate of 26.3 recorded in 1958 and a decrease of 14% from the high rate of 29.7 recorded in 1957.

The chief causes of infant deaths were (1958 figures are shown in brackets) Immaturity 22 (33); Injury at Birth 21 (20); Pneumonia, all forms 19 (19); Postnatal asphyxia and atelectasis 17 (12); Congenital malformations 22 (21). A detailed list of the causes of infant deaths is on pages 13 and 14 of this report.

NEO-NATAL MORTALITY

Deaths of infants in the first four weeks of life numbered 110 which is 70.8% of the total infant deaths under one year of age as compared with 79.3% in 1958 and 76.1 in 1957. The neo-natal mortality rate per 1,000 live births was 18.3 per 1,000 live births which is a decrease from the rate of 20.9 recorded in 1958.

MATERNAL MORTALITY

There were 2 deaths from conditions pertaining to childbearing giving a rate of .3 per 1,000 live births as compared to 4 deaths in 1958 with a rate of .7 per 1,000 live births.

DEATHS

There were 2,738 deaths of Winnipeg residents in 1959 giving a rate of 10.6 per 1,000 population and is an increase of 6% from that recorded in 1958 and 1957.

Heart diseases were again the major cause of death with 1,010 or 36.9% of all deaths. Cancer was second with 482 or 17.7%. Accidents, poisonings and violent deaths continue to cause over 5% of all deaths.

Eighty-eight percent of deaths occurred in persons 45 years of age or more and 68% occurred in persons 65 years and over. In the age group one year to 44 years, 6% of deaths occurred.

Our appreciation and thanks is extended to all those who co-operated with us during the year in permitting us to use the registrations of births and deaths or copies of them, and for the use of the tabulating machines.

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LIVE BIRTHS, RESIDENTS ONLY

YEAR	NUMBER OF BIRTHS	RATE PER 1,000 POPULATION	INFANT DEATHS	RATE PER 1,000 POPULATION
1943	4,294	18.9	197	45.9
1944	4,060	17.7	144	35.5
1945	4,210	18.2	134	31.8
1946	5,223	22.6	184	35.2
1947	5,532	23.6	193	34.7
1948	4,779	20.4	153	32.0
1949	4,968	21.2	137	27.6
1950	5,045	21.1	133	26.4
1951	5,254	21.9	115	21.9
1952	5,417	22.5	131	24.2
1953	5,586	23.0	166	29.7
1954	5,920	24.3	145	24.4
1955	6,016	24.2	147	24.4
1956	5,908	23.3	144	24.4
1957	6,067	23.8	180	29.7
1958	5,892	23.1	155	26.3
1959	6,023	23.4	154	25.6

ORDER OF BIRTH BY AGE OF MOTHER

	10-14 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40 & Over	Age Unknown	TOTAL	% of TOTAL
1st	6	527	1,037	446	151	57	10		2,234	37.1
2nd		114	648	514	221	104	16		1,617	26.8
3rd		15	222	363	251	139	29		1,019	16.9
4th		2	84	181	173	107	30		577	9.6
5th			25	67	78	72	22		264	4.4
6th & over			8	66	93	95	26		288	4.8
Unknown			2					22	24	.4
TOTAL	6	658	2,026	1,637	967	574	133	22	6,023	100.0

Table Showing Number of Births, Deaths, Infant Deaths And Maternal Mortality With Rates For Winnipeg For Years 1911-1959 * **

YEAR	BIRTHS	RATE PER 1,000 pop.	DEATHS	RATE PER 1,000 POP.	INFANT DEATHS	RATE PER 1,000 POP.	MATERNAL MORTALITY	RATE PER 1,000 L.B.
1911-1915	5,369	29	2,022	11.1	813	152	35	6.5
1916-1920	5,695	30	2,177	11.5	570	104	35	6.9
1921-1925	5,371	27	1,677	8.5	415	77	25	4.7
1926-1930	4,527	22	1,777	8.7	277	61	26	5.7
1931-1935	3,944	18	1,512	6.9	170	43	20	5.1
1936-1940	3,785	17	1,697	7.7	138	36	17	4.5
1941-1945	4,037	18	1,985	8.7	159	39	10	2.3
1946-1950	5,200	22	2,035	8.7	164	31	4	.8
1951	5,254	21.9	2,091	8.7	112	21.4	6	1.1
1952	5,417	22.5	2,063	8.6	131	24.2	1	.2
1953	5,586	23.0	2,288	9.4	166	29.7	5	.9
1954	5,920	24.3	2,327	9.6	144	24.3	3	.5
1955	6,016	24.2	2,332	9.6	147	24.4	4	.7
1956	5,908	23.3	2,438	9.6	144	24.4	1	.2
1957	6,067	23.8	2,551	10.0	180	29.7	2	.3
1958	5,892	23.1	2,566	10.0	155	26.3	4	.7
1959	6,023	24.4	2,738	10.6	154	25.6	2	.3

* 1911-1930 include non-residents. 1931-1959 include residents only.

** 1911-1950 include average number of births, deaths, infant deaths, and maternal mortality.

TABLE SHOWING NUMBER OF DEATHS AND RATE PER 100,000 POPULATION FROM CERTAIN DISEASES FOR WINNIPEG FOR THE YEARS 1911 TO 1959 * **

YEAR	T.B.	Rate per 100,000 Population	4 Acute Comm. Diseases	Rate per 100,000 Population	Diseases of Heart	Rate per 100,000 Population	Cancer All Forms	Rate per 100,000 Population
1911-1915	131	72	142	78	117	64	87	48
1916-1920	136	72	135	72	138	73	135	72
1921-1925	94	48	65	33	174	88	178	90
1926-1930	86	42	37	18	233	115	209	103
1931-1935	65	29	15	7	308	141	268	123
1936-1940	52	24	11	5	450	205	283	129
1941-1945	51	22	8	4	613	270	324	143
1946-1950	34	14	4	2	676	291	333	143
1951	27	11	1	0.4	704	294	355	148
1952	23	10	-	-	754	315	411	172
1953	16	7	2	0.8	817	336	435	179
1954	17	7	1	0.4	872	358	442	182
1955	18	7	1	0.4	876	359	418	167
1956	11	5	2	0.8	867	341	464	182
1957	22	9	3	1.2	922	362	413	162
1958	17	7	-	-	958	375	475	186
1959	[illegible]	6	-	-	1010	392	482	187

LEADING CAUSES OF DEATHS, 1959, RESIDENTS ONLY

CAUSE OF DEATH	1959		1958	
	Number of Deaths	% of Total Deaths	Number of Deaths	% of Total Deaths
Heart Diseases (410-443)	1010	36.9	958	37.3
Malignant Neoplasms (140-205)	482	17.7	475	18.5
Vascular Lesions Affecting Central Nervous System (330-334)	267	9.8	317	12.4
Malformations and Diseases of Early Infancy (750-776)	125	4.5	127	4.9
Accidents, Poisonings & Violent Deaths (E800-E999)	156	5.7	139	5.4
Pneumonia (490-493)	179	6.5	110	4.3
Acute Poliomyelitis (080)	- -	- -	5	.2
Diabetes Mellitus (260)	36	1.3	22	.9
Ulcer of stomach and duodenum (540-541)	23	.8	16	.6
Nephritis & Nephrosis (590-594)	12	.4	14	.5
Intestinal Obstruction and Hernia (560-561, 570)	14	.5	22	.9
Pulmonary Tuberculosis (002)	15	.5	17	.7
Hypertension without mention of Heart (444-447)	16	.6	10	.4
Cirrhosis of Liver (581)	24	.9	21	.8
Bronchitis (500-502)	20	.7	13	.5
All other causes	359	13.2	300	11.7
TOTAL	2,738	100.0	2,566	100.0

Causes of Death

The following pages give particulars of the number of deaths of Winnipeg residents for the year 1959, classified according to cause, age and sex. The causes of death are coded according to the Seventh revision of the International Lists of Diseases and Causes of Death.

DEATHS TO WINNIPEG RESIDENTS BY CAUSE, AGE AND SEX - 1959

CAUSE	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	TOTAL
Pulmonary Tuberculosis (002)	13	2						1		1	2	4	1	5	1		15
Other T.B. of respiratory system (001,003-008)	-	-															-
T.B., other forms (010-019)	-	1												1			1
Syphilis and its sequelae (020-029)	2	2									1			2		1	4
Meningococcal infections (057)	-	-															-
Poliomyelitis (080)	-	-															-
Malignant neoplasms including neoplasms of lymphatic and haematopoietic tissues (140-205)	266	216		1		3	5	3	4	19	56	86	97	134	68	6	482
Benign and unspecified neoplasms (210-239)	8	4	1				1		2			1	1	4	1	1	12
Diabetes Mellitus (260)	21	15							2		2	6	5	17	4		36
Anaemias (290-293)	2	3										1	1	1	2		5
Vascular lesions affecting central nervous system (330-334)	125	142			1					3	4	25	24	101	91	18	267

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. ≠	Total
Nonmeningococcal Meningitis (340)	2							1					1				2
Chronic rheumatic heart disease (410-416)	9	14								2	3	6	4	5	3		23
Arteriosclerotic and degenerative heart diseases (420-422)	598	302						1	2	12	62	129	119	353	187	35	900
Other diseases of heart (430-434)	21	25								2	2	3	3	18	14	4	46
Hypertension with heart disease (440-443)	20	21									2	6	5	18	9	1	41
Total Heart Diseases (410-443)	648	362						1	2	16	69	144	131	394	213	40	1,010
Hypertension without mention of heart (444-447)	8	8									2	1	1	6	5	1	16
Influenza (480-483)	15	11		1			1	1	2	2	2	5		9	3		26
Pneumonia (490-493)	114	65		7	2		2		1	5	9	11	12	60	60	10	179
Bronchitis (500-502)	15	5		3								3		5	7	2	20

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	Total
Ulcer of stomach and duodenum (540-541)	19	4									2	5	1	13	2		23
Appendicitis (550-553)	3										2			1			3
Intestinal obstruction and hernia (560,561,570)	4	10								1	1	1	2	5	4		14
Gastritis, duodenitis, enteritis and colitis, except diarrhoea of the newborn (543,571-572)	6	1					1						2	1	3		7
Cirrhosis of Liver (581)	18	6						1	1	4	3	8	1	3	3		24
Nephritis and nephrosis (590-594)	6	6		1					2		1	3		4	1		12
Hyperplasia of prostate (610)	5													2	3		5
Complications of pregnancy, childbirth and the puerperium (640-652, 670-689)		2						1	1								2

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	Total
Congenital Malformations (750 - 759)	16	18	18	7	1		1	1	1	1	3				1		34
Birth Injuries, postnatal asphyxia and atelectasis (760 - 762)	21	19	35	4	1												40
Infections of the newborn (763 - 768)	6	7	12	1													13
Other diseases peculiar to early infancy and immaturity unqualified (769 - 776)	23	15	38														38
Totals - (750 - 776)	66	59	103	12	2		1	1	1	1	3				1		125
Senility without mention of psychosis, ill-defined and unknown causes (780 - 795)	12	10	2	1								3	2	3	5	6	22

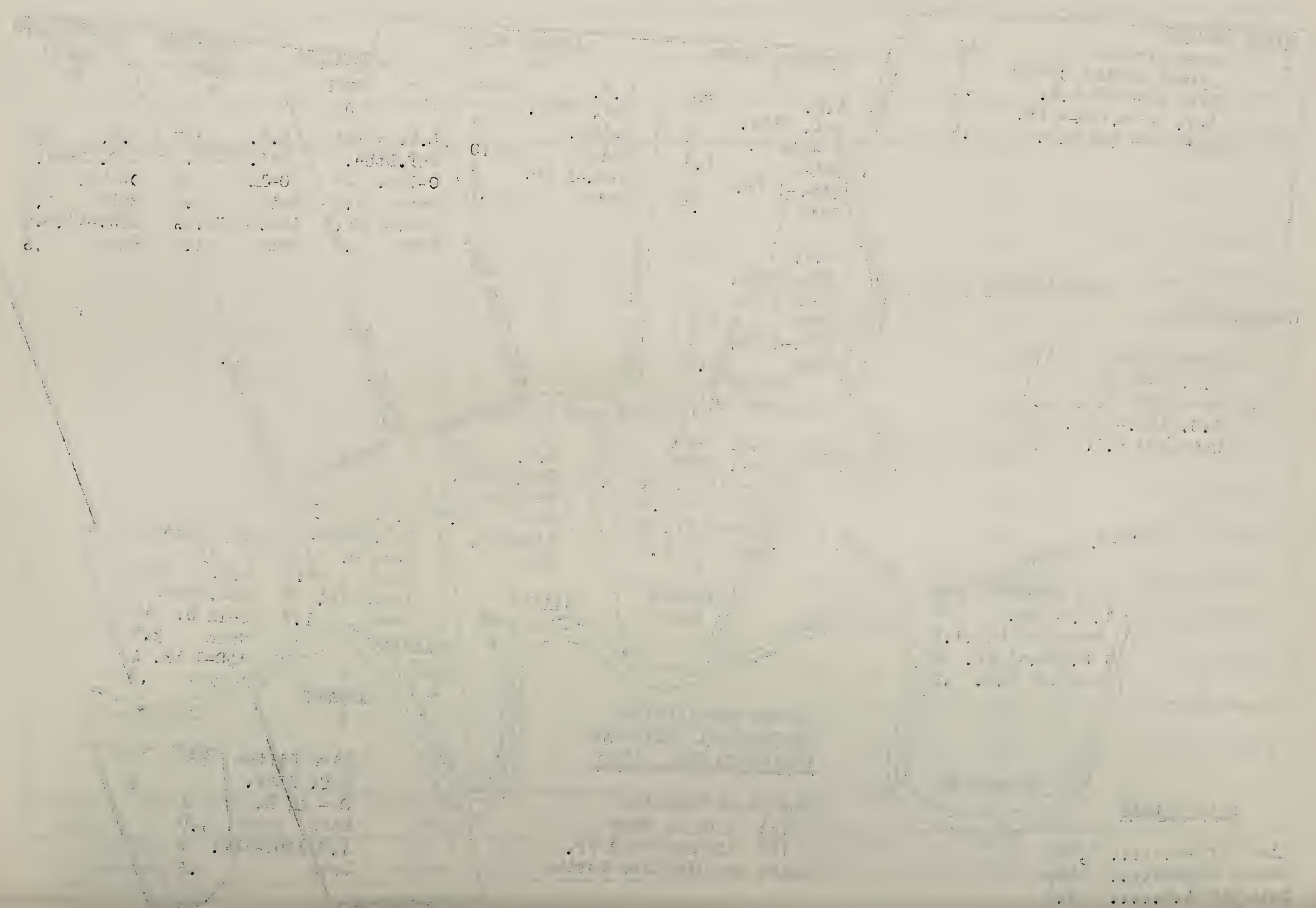
Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	Total
Accidents, Poisonings and Violence (External Cause)																	
Motor vehicle accidents (E810 - E835)	28	12				1	3	7	5	3	4	5	5	4	3		40
All other accidents (E800-E802, E840-E965)	48	39	1	10	2		3	6	7	6	12	3	4	14	12	7	87
Suicide and self-inflicted injury (E970-E979)	23	3						1	1	7	4	5	3	5			26
Homicide and operations of war (E980-E999)	1	2								2				1			3
Total Violent Deaths (E800-E999)	100	56	1	10	2	1	6	14	13	18	20	13	12	24	15	7	156
All other diseases (residual)	163	107	3	8	3	3	2		3	9	21	29	27	91	61	10	270
GRAND TOTALS	1641	1097	110	44	10	7	19	24	34	79	200	349	321	886	553	102	2,738

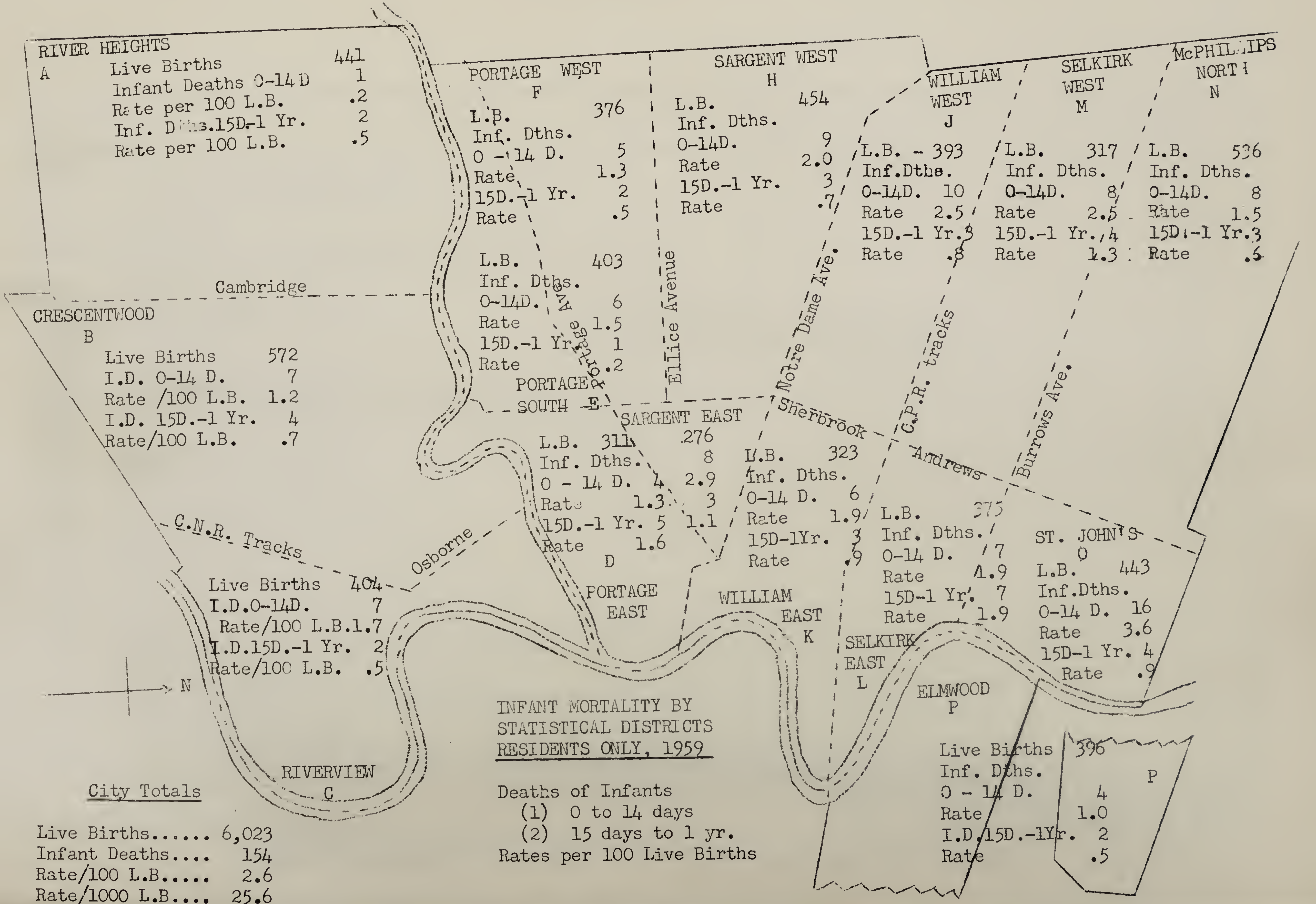
INFANT DEATHS, WINNIPEG RESIDENTS, FOR THE YEAR 1959 - BY CAUSE, AGE AND SEX

Code Number	Cause of Death	Total	Male	Female	0-7 Days		8-14 Days		15-21 Days		22 d. -1 mo.		1 mo. -1 yr.	
					M	F	M	F	M	F	M	F	M	F
751	Spina bifida and meningocele	3	1	2		1				1			1	
754	Congenital malformations, circulatory system	7	5	2	2	1		1	1				2	
750,752,753, 755-759	All other congenital malformations	15	5	10	4	6				1			1	3
760-761	Birth Injuries	20	11	9	10	9	1							
762	Postnatal asphyxia and atelectasis	19	10	9	7	8							3	1
763	Pneumonia of newborn	12	6	6	6	4		1						1
764	Diarrhoea of newborn	-	-	-										
768	Other sepsis of newborn	1	-	1				1						
770	Haemolytic disease of newborn (erythroblastosis)	2	2	-	1		1							
769,771,772	All other defined diseases of early infancy	3	2	1	2			1						
773	Ill-defined disease peculiar to early infancy	11	8	3	8	3								
774-776	Immaturity with subsidiary condition or unqualified	22	11	11	11	10		1						
	All other causes	39	23	16	5	1				1			13	14
	TOTALS	154	84	70	56	43	2	5	1	3			25	19

DETAILS OF INFANT DEATHS LISTED IN "ALL OTHER CAUSES" FOR 1959, RESIDENTS

No.	Cause of Death	Total	Male	Female	0-7 Days		8-14 Days		15-21 Days		22 d. -1 mo.		1 mo, -1 yr.	
					M	F	M	F	M	F	M	F	M	F
053	Septicaemia and Pyaemia	1		1										1
204.3	**Acute Leukaemia**	1		1										1
227	Other benign neoplasm of muscular and connective tissue	1	1		1									
296	Purpura and other haemorrhagic conditions	1		1						1				
342	Intracranial and intraspinal abscess	1	1										1	
367	Other diseases of cranial nerves	1	1										1	
481	Influenza with other respiratory manifestations, and influenza, unqualified	1		1										1
491	Bronchopneumonia	4	3	1									3	1
492	Primary atypical pneumonia	2	2										2	
493	Pneumonia, other and unspecified	1		1										1
501	Bronchitis, unqualified	3	1	2									1	2
527	Other diseases of lung and pleural cavity	4	2	2	1	1							1	1
586	Other diseases of gallbladder and biliary ducts	1		1										1
594	Other renal sclerosis	1	1										1	
600.0	Pyelitis, pyelocystitis, and pyelonephritis	1	1										1	
744.1	Inborn defect of muscle	1	1										1	
780.5	Disturbance of co-ordination	1	1										1	
783.1	Haemoptysis	1	1		1									
795.0	Other ill-defined conditions	1	1		1									
E921	Inhalation and ingestion of food causing obstruction or suffocation	6	5	1									5	1
E924	Accidental mechanical suffocation in bed and cradle	3		3										3
E925	Accidental mechanical suffocation in other and unspecified circumstances	1		1										1
E926	Lack of care of infants under 1 year of age	1	1		1									
	TOTALS	39	23	16	5	1				1			18	14





INFANT MORTALITY BY
STATISTICAL DISTRICTS
RESIDENTS ONLY, 1959

Deaths of Infants
(1) 0 to 14 days
(2) 15 days to 1 yr.
Rates per 100 Live Births

City Totals

Live Births......	6,023
Infant Deaths....	154
Rate/100 L.B.....	2.6
Rate/1000 L.B....	25.6

CITY HEALTH DEPARTMENT WINNIPEG MANITOBA LETTERS AND NAMES OF STATISTICAL DISTRICTS

INFANT MORTALITY, 1959, BY DISTRICTS – RESIDENTS ONLY

District	Live Births	Total Infant Deaths No.	Total Infant Deaths Rate/ 100 L.B.	Infant Deaths 0 – 14 Days No.	Infant Deaths 0 – 14 Days Rate/ 100 L.B.	Infant Deaths 15D. – 1 Yr. No.	Infant Deaths 15D. – 1 Yr. Rate/ 100 L.B.	Stillbirths No.	Stillbirths Rate/ 100 L.B.	Puerperal Deaths No.	Puerperal Deaths Rate/ 100 L.B.
River Heights	441	3	.7	1	.2	2	.5	2	.5	–	–
Crescentwood	572	11	1.9	7	1.2	4	.7	6	1.0	1	.2
Riverview	404	9	2.2	7	1.7	2	.5	8	2.0	–	–
Portage East	311	9	2.9	4	1.3	5	1.6	6	1.9	1	.3
Portage South	403	7	1.7	6	1.5	1	.2	4	1.0	–	–
Portage West	376	7	1.9	5	1.3	2	.5	5	1.3	–	–
Sargent East	276	11	4.0	8	2.9	3	1.1	1	.4	–	–
Sargent West	454	12	2.6	9	2.0	3	.7	6	1.3	–	–
William West	393	13	3.3	10	2.5	3	.8	3	.8	–	–
William East	323	9	2.8	6	1.9	3	.9	6	1.9	–	–
Selkirk East	375	14	3.7	7	1.9	7	1.9	3	.8	–	–
Selkirk West	317	12	3.8	8	2.5	4	1.3	3	.9	–	–
McPhillips North	536	11	2.1	8	1.5	3	.6	7	1.3	–	–
St. John's	443	20	4.5	16	3.6	4	.9	6	1.4	–	–
Elmwood	396	6	1.5	4	1.0	2	.5	7	1.8	–	–
TOTALS	6,023 *	154		106		48		73		2	
Rates /100 L.B.			2.6		1.8		.8		1.2		.03
Rates /1,000 L.B.			25.6		17.6		8.0		12.1		.33

*3 – Unspecified

INFECTIOUS DISEASES - CASES AND DEATHS - 1959

The total number of notifications of infectious diseases in 1959 was 765. This figure which is only half that recorded for 1958 is due to the change in notification regulations which became effective February 1st., 1959. Up to the end of January, 1959 the old system was adhered to, but from February onwards, Chickenpox, Erysipelas, Measles, Mumps, Influenza were not notifiable. This explains the low incidence of the aforementioned diseases recorded for the year. The deaths were 42 which is nearly twice as much as the deaths in 1958 and this increase can be attributed almost entirely to a second wave of Asian Influenza.

CASES AND DEATHS REPORTED	CASES 1959	DEATHS 1959	CASES 1958	DEATHS 1958
Chickenpox	10	-	163	-
Diarrhoea, of the New Born	22	-	89	-
Diphtheria	-	-	4	-
Diphtheria Carriers	-	-	-	-
Dysentry, Amoebic	-	-	-	-
Dysentry, Bacillary	30	-	28	-
Dysentry, Unspecified	16	-	-	-
Encephalitis, Infectious	-	-	3	1
Erysipelas	1	-	8	-
Hepatitis, Infectious	149	1	97	1
Influenza	-	26	9	-
Measles	3	-	304	-
Meningitis, (Meningococcal)	5	-	6	-
Meningitis, (Viral or aseptic)	28	-	-	-
Mumps	16	-	88	-
Paratyphoid Fever	-	-	-	-
Paratyphoid Fever Carriers	-	-	-	-
Poliomyelitis	-	-	77	5
Scarlet Fever	335	-	405	-
Smallpox	-	-	-	-
Tuberculosis, Pulmonary	69	15	39	17
Typhoid Fever	10	-	-	-
Typhoid Fever Carriers	1	-	-	-
Undulant Fever	4	-	-	-
Whooping Cough	61	-	3	-
Food Poisoning	5	-	-	-
TOTAL	765	42	1322	24

Each year, with improved virus diagnostic facilities, a more accurate picture of the preponderance of viral diseases in the total list of infectious diseases becomes apparent, and in 1959 a more detailed viral epidemiological picture was obtained.

ASEPTIC MENINGITIS AND POLIOMYELITIS

Not since 1926 has Winnipeg had a year with no clinical cases of Poliomyelitis. Yet in 1959 there were no cases of Poliomyelitis but in contrast there were 28 cases of Aseptic Meningitis. All these occurred in children, they were not associated with paralysis and occurred in April, September and October. Two enterovirus were isolated

in distinct waves. Echo 6 was isolated from 10 cases and Coxsackie B5 from 5 cases. The Echo 6 was the major cause of this syndrome in August and the Coxsackie B5 in September and October. In addition, the latter virus was obtained from several cases of Pleurodynia, Pneumonia and Summer Diarrhoea and was also isolated from sewage sample taken during these months.

INFLUENZA

Reports were received of an Influenza outbreak in the City in April and May. Viral and serological studies clearly demonstrated that this was the second wave of Influenza A (Asian Strain). There were 26 deaths attributed directly to Influenza but comparisons of death rates of Pneumonia and Influenza in April, 1958 and 1959 clearly show the serious impact of this disease in the older age group and can be seen from the following Table.

AGE GROUP	M.	F.	1958 Total	M.	F.	1959 Total
0 - 19	4	0	4	3	1	4
20 - 39	0	0	0	1	2	3
40 - 59	2	1	3	7	4	11
60 - 94	14	14	28	45	35	80
Total	20	15	35	56	42	98

INFECTIOUS HEPATITIS

149 cases in 1959 as compared with 97 the previous year. This is the highest number of cases recorded since the records were compiled and this disease constitutes a major problem. The value of Gamma Globulin in household contacts is clearly established and is made available free of cost from the Provincial Government.

TYPHOID FEVER

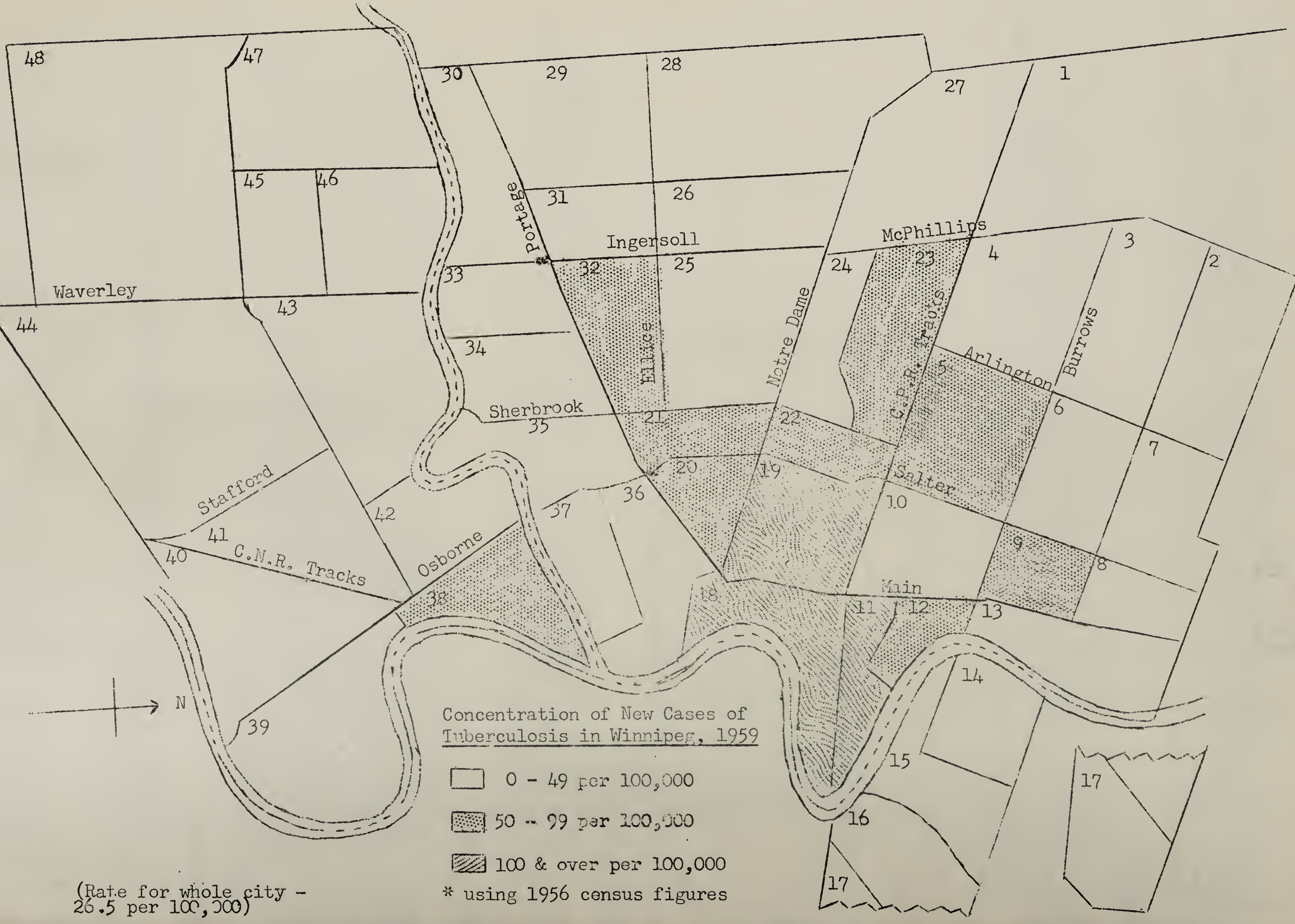
The cases of typhoid fever occurred in three separate outbreaks. The first developed when a father and his daughter became ill, after returning from a holiday in Ontario, during which time they stayed at a farm which was owned by a relative who had typhoid many years ago in Europe. The second outbreak developed in two little girls, the daughter of a recently landed Polish Immigrant. The latter was found to be a typhoid carrier. The third outbreak in which 6 cases developed as a result of a Brownie Tea party which took place at the end of November was ultimately traced down to be due to an unknown carrier, living outside Winnipeg who had come in to town to help make the food for the party. All cases recovered completely and one carrier was registered, the other was cured by cholecystectomy.

UNDULANT FEVER

Four cases developed in employees of a packing plant. This increased incidence was thought to be associated with the commencement of the Brucellosis eradication scheme in the Province in 1959.

MEASLES

Though no longer notifiable, 684 cases of measles developed in the Winnipeg school children thus confirming the prediction that 1959 would be a measles year.



Concentration of New Cases of Tuberculosis in Winnipeg, 1959

▭ 0 - 49 per 100,000

▨ 50 - 99 per 100,000

▨ 100 & over per 100,000

* using 1956 census figures

(Rate for whole city - 26.5 per 100,000)

CITY HEALTH DEPARTMENT, WINNIPEG, MANITOBA

NUMBERS ON MAP INDICATE STATISTICAL DISTRICTS

The nation wide trend in control of tuberculosis is reflected in the figures for Winnipeg, although the local figures are now becoming too small to make analysis of much value. For example there were only 16 deaths due to tuberculosis, compared to 75 from bronchogenic carcinoma. The death rate from tuberculosis is 6.3 per 100,000 which has been the order of the rate over the past ten years.

Sixty-eight new cases reported which is a rate of 26.5 per 100,000, comparing favorably with the provincial rate of 40.2, and national rate of 37.0. Forty-four of the new cases were active pulmonary disease, twenty-six male, and eighteen female with concentration of the male cases in the older ages (12 over 60, 16 over 50, and six of the 12 far advanced cases over seventy years of age). The female cases were concentrated in the 20-39 year age group (8 in the 20-29, 4 in the 30-39).

The accompanying map shows the rate of new cases by statistical districts with a peak of 146 per 100,000 in district No. 19. The three districts with the highest new case rate average 140 per 100,000. These same districts also have a population over 65 of 15.5% compared to the Greater Winnipeg average of 9.4% over 65. It is these older age groups which account for a large proportion of the new cases and may be sources of infection. They probably live in these "slum areas" because of economic hardships associated with the aged.

SURVEYS - The City Health Department co-operated with the Sanatorium Board in conducting surveys with mobile units and the 4 x 5 unit in the City Hall 18,377 70 mm x-rays were taken by mobile units, 9,183 at the City Hall, a total of 27,560. Three new cases were found at the City Hall unit. No new cases were found on the 70 mm surveys.

Routine chest x-rays are becoming a less efficient method of case findings, and more emphasis is being placed on x-raying tuberculin sensitive individuals, contacts, and certain exposed groups. Pre-employment x-rays are being done only if no recent x-ray has been taken. Two of the three cases discovered in the survey were clinically ill and were Far Advanced Tuberculosis active, bacillary. Only one was discovered as a routine film, or a ratio of one in 27,560, or a little over 1% of total cases discovered.

556 contacts of tuberculin positive persons were x-rayed without discovering a case.

There was a monthly average of 126 Winnipeg residents hospitalized in the various Sanatoria, 62% at St. Boniface, 25% at Ninette, 12% at Central Tuberculosis Clinic and 1% at Assiniboine Hospital.

The City Health Department carries out follow up on cases at home, former cases until these are discharged from supervision, and contacts. This is a very important part of the Tuberculosis Control program, and is carried out largely by the public health nurse. During the year there was an average of 1,163 persons under active supervision.

The City Health Department spends a considerable amount of its efforts in the regulation and supervision of welfare institutions. These institutions assume the responsibility of care and supervision of individuals unable to care for themselves. They are licensed by the City of Winnipeg under the Welfare Institutions By-Law. The responsibility of the Health Department is to ensure that physical facilities meet licensing requirements and that adequate care is being administered. These institutions consist of day nurseries, nursery schools, child caring institutions, boarding care homes, and nursing homes. The first three are concerned with care of children and are dealt with elsewhere in the annual report. The latter two care for long term illnesses not requiring active hospital care.

Nursing Homes are for patients with disabilities requiring the skilled nursing care of a registered nurse. Boarding Care Homes need only supply the services and supervision of a licensed practical nurse. The majority of long term illnesses occur in older persons and the need for these institutions is increasing each year with the increase in older population, and increased survival time in long term illnesses.

In the fifteen years between 1941 - 1956 the population of Winnipeg over 65 has increased from 14,142 to 27,727 an increase of 96%, compared to general population increase of less than 15%. Between 1911 and 1956 the population over 65 has increased 14.5 times as rapidly as the general population.

Year	Polulation of Winnipeg	Population over 65	% over 65
1911	136,035	2,057	1.5 %
1941	221,960	14,142	6.4 %
1956	255,093	27,727	10.9 %
	Population of Suburbs	Population over 65	% over 65
1956	154,028	10,782	7.0 %

Winnipeg licenses both proprietary and non-propietary institutions. The latter are non-profit institutions operated by voluntary boards or religious bodies. They are larger institutions and are situated in buildings designed as institutions, and some have very elaborate facilities. Four of these are licensed, one as a boarding care home, three as nursing homes.

Four boarding care, and eighteen nursing homes of the proprietary type were licensed in 1959. These institutions are operated by individuals as a means of livelihood. They are all converted from older homes, some with extensive alterations and additions. A number of Winnipeg residents are placed in two non-proprietary institutions outside of Winnipeg licensed by the Provincial Government. The license of one nursing home was cancelled during the year because of failure to meet regulations.

In December, 1959 there were 444 beds in the four non-proprietary homes licensed by this department, and 591 beds in the seventeen proprietary homes. Two-thirds of the beds were public beds.

The chief Health Inspector and one Housing Inspector carry out all inspections of welfare institutions with regard to enrironmental facilities.

Two full time Nursing Supervisors are assigned to welfare institutions. These supervisors process placement of patients, supervise nursing services in the institutions and offer consulting services to the operators, and to families planning a private placement.

All applications for boarding care or nursing home placement with financial assistance by the Public Welfare Department are first referred to these Nursing Supervisors. The patient is visited and all details are gathered, including a medical report from the referring physician. In discussion with a physician of the Health Department a decision is made as to suitability of placement. If placement is not indicated the family is advised on other community facilities. If the patient requires more active treatment than given in a nursing home, referral to a general hospital or to the Municipal Hospitals may be recommended.

615 applications for placement were received in 1959 (up 24%). Of these 341 were placed in nursing homes, and 28 in boarding care homes (60% of the applications). 46 were found to be financially responsible for their own placement or non-residents of Winnipeg. 41 were admitted to the Municipal hospitals, 26 were admitted to old folks homes, but 16 of these were to the Jewish Old Folks Home, which has facilities almost comparable to a general hospital. 107, or 17% were not placed. Some of these died before placement, some refused nursing home placement and in many the family reconsidered and suitable arrangements were made outside. In addition to the above, many re-admissions were processed.

A register of occupancy of all Boarding Care and Nursing Homes beds is maintained in the department, and this is brought up to date daily by the clerk assigned to the Nursing Home Supervisors.

Each home is visited regularly by the Nursing Supervisors to assist the operator in maintaining good nursing standards. All accidents or unusual incidents must be reported to the Health Department under the regulations of the By-Law. These reports often indicate needs for improved nursing service. All staff changes are reported to the Health Department and supervision is maintained to ensure adequate staffing.

The nutritionist of the department spends much of her time on these homes. She acts as a consultant on nutrition, giving advice on meal planning and preparation. Regular visits are made to the homes to see the meals are served and give advice.

All public patients in nursing homes who are residents of Winnipeg receive medical supervision by physicians of the department. They are visited regularly every 7 - 10 days and at any time in between if indicated. Laboratory specimens are now collected and are examined at the Provincial Laboratory through arrangements made during the year. There are frequent referrals of patients to the facilities of the out-patient departments of the Winnipeg General and St. Boniface Hospitals. Patients are moved to the general hospitals and to the Municipal hospitals when the move seems advisable.

Towards the end of 1959 the provincial government announced legislation assuming full provincial financial responsibility for indigents in nursing homes. This is expected to have considerable effect on the 1960 program.

MEDICAL CARE

The Health Department provides medical care to indigent persons under certain circumstances. The first group are those Winnipeg residents who are public patients in nursing homes. These people are cared for by physicians of the department and all medication is supplied by the pharmacy of the Municipal Hospitals.

Medically indigent persons at home who can get about are referred to the outdoor departments of the Winnipeg General Hospital and St. Boniface Hospital for all medical care. This is comparable to visiting the doctor's office. It is the most desirable place to carry out a medical consultation, as both facilities and records assist the physician to render his best service. However, in some emergencies, just as in private practice, a house visit is required. Sometimes this is recommended after a visit by a public health nurse, or by a nurse of the V. O. N. At other times the call comes directly to the Health Department as an emergency. In these circumstances home visits are made by physicians of the department. 1,911 home calls were made during 1959, an increase of 13% over the previous year.

PUBLIC HEALTH NURSING DIVISION

PERSONNEL CHANGES

During 1959 there were 13 resignations of nursing staff representing a turnover of 23.6 percent. Of these, seven left because of home duties, five to accept other positions, and one nurse left to travel in Europe. Three nurses were granted leave of absence to take a course in public health nursing at the University of Manitoba under a Federal Health Grant.

Appointments to the nursing staff numbered 10 during the year; one of these being a newly created position. Four nurses returned to the Division after a year's post graduate course at the University of Manitoba.

The total number of nursing positions in the Winnipeg Health Department is now 55. Twenty-three percent of the staff are married. Fifty-nine percent of the Nursing Staff have university degrees or diplomas.

The ratio of field staff to population (exclusive of supervisory and administrative staff and the audiometer nurse technician) is one nurse to five thousand, six hundred, and six people (5,606).

MATERNAL AND INFANT HEALTH

Six thousand and twenty-three (6,023) births occurred to Winnipeg residents in 1959. This represents an increase of 131 births over the previous year. Two maternal deaths occurred. There were one hundred and fifty-four (154) deaths of infants under one year of age (25.6 per 1,000 live births) and of these one hundred and ten (110 or 18.3 per 1,000 live births) were under one month.

Public Health Nurses made ten thousand, nine hundred and forty-five (10,945) visits to children under one year to give advice and demonstrations to mothers about general care and feeding. Sixty premature babies born at the Winnipeg General Hospital received close follow-up by public health nurses. It is expected to expand the premature follow-up program to other hospitals next year.

For the past three years, public health nurses in Winnipeg have assisted the Paediatric Department of the Faculty of Medicine, University of Manitoba, with a Premature Study. Their role consisted of visiting some one thousand premature babies born over a five year period at the Winnipeg General Hospital in order to complete information outlined on a questionnaire. In 1959, the public health nurses assisted in the final stages of this project by visiting and filling out a questionnaire on 80 normal children who acted as a control group. The results of this project will be published in July, 1960. The study will likely indicate changes that might be made in the follow-up and treatment of premature babies.

MATERNAL HYGIENE

Nine weekly classes for expectant mothers were conducted by public health nurses in the Winnipeg Health Department in 1959. The 412 mothers registered each attended an average of eight lectures. The community interest in this service is excellent. The attendance at classes could easily be increased if more staff were available.

CHILD HEALTH CENTRES

Ten Child Health Centres provided weekly services to children under school age not receiving medical care due to economic or geographic reasons. There were 1,511 children registered for this service, a decrease of 328 children from 1958. The total attendance at the Child Health Centres decreased from 39,135 in 1958 to 27,912 in 1959, possibly due to wider medical coverage provided by the Manitoba Health Service. A further decrease is expected when the Provincial Government finances the Manitoba Health Service for the care of medically indigent citizens.

FOLLOW-UP OF POISON CASES

There were 212 visits to cases of poison made by public health

nurses in 1959, an increase of 67 cases from 1958. This service is carried out in cooperation with the Poison and Accident Control Centre at the Children's Hospital. The purpose of the visit is not only to obtain more detailed information about the cause of the accident, but also to institute educational measures that might prevent future accidents from occurring because of carelessness, ignorance, or neglect. In 1959, 75% of the poison cases occurred in children under 3 years of age. Aspirin and cleaning fluids were the most common types of poisons consumed.

DAY NURSERIES, NURSERY SCHOOLS, FOSTER HOMES

In 1959, the Health Department licensed and supervised 6 Day Nurseries caring for approximately 188 children and 12 Nursery Schools caring for approximately 392 children. In order to maintain a satisfactory standard in these institutions, and to approve applications to operate additional Day Nurseries and Nursery Schools in Winnipeg, a training program in pre-school education should be organized by the appropriate authority.

One hundred and one new foster homes caring for 155 children were supervised and approved for licensing by the Nursing Division during the year.

SCHOOL HEALTH SERVICES

The Health Department has continued it's policy of concentrating medical and nursing time on school children presenting health problems that might effect their educational progress. This has been evidenced by a gradual reduction in routine medical examinations, and a greater amount of time spent on individual health appraisals and counselling.

Statistics for 1959 indicate that approximately 52 percent of children enrolled in Winnipeg schools for the first time were examined privately. A further reduction in routine school medical examinations has been made possible by the public health nurses' careful analysis of 3,843 questionnaires filled out

by parents of Grade VII pupils and of 2,538 questionnaires filled out by Grade X pupils.

Regular screening for possible defects in vision and hearing is carried out by public health nurses. There were 6,424 school children given a hearing test by a public health nurse and 345 or 5.37 percent of these children required further examination by an otologist.

Routine vision tests are carried out in all elementary grades, also grades VII and X. Children with vision defects whose parents cannot afford private attention are referred to the Eye Clinic at the Children's Hospital. Of the 1,128 children referred to this Clinic, 550 were new cases and 578 were sent to have their eyes re-examined.

Careful screening of all doubtful cardiac cases continues to be an important part of the school health program. Of the 63 children examined at the Health Department Cardiac Diagnostic Clinic, 9 were diagnosed as congenital heart cases, 4 as rheumatic carditis, and 50 were "delabeled" as cardiacs. The Health Department provided a daily dose of 400,000 units of oral penicillin to each of the 143 children with rheumatic heart disease. Thirty school children with diabetes and 61 school children with epilepsy were listed in the registry for handicapped school children.

Manitoba was the first Province in Canada to offer a fourth dose of poliomyelitis vaccine to school children. Approximately 50,000 school children in Winnipeg received this inoculation.

During the year the Winnipeg Health Department organized a monitoring service of minor viral diseases in the community. This new service was made possible by the public health nurses' weekly reporting of all absenteeism in the Winnipeg school population. With this information, and in cooperation with the virus laboratory of the Winnipeg General Hospital, the Health Department was able to obtain selected samplings of throat swabs, etc. for laboratory tests of different clinical syndromes in order to obtain an epidemiological

picture of viral disease in Winnipeg.

NURSING HOMES AND BOARDING CARE HOMES

The licensing of Nursing Homes and Boarding Care Homes and the placement and supervision of patients in these homes occupies the full time of two public health nursing supervisors and a considerable portion of the time of the Director of Public Health Nurses. In 1959, 26 homes with a bed capacity of 1,157 were licensed. There were 743 applications received for placement and 378 or 52% were placed in Nursing or Boarding Care Homes by the Nursing Division. The 48% processed but not placed were either found to be non-residents of Winnipeg or the family reconsidered and decided against placement, or other arrangements such as placement in Municipal Hospitals were made.

More detailed information on this program will be found under Welfare Institutions.

EDUCATION PROGRAM

To improve the school health program, regular meetings were held between the School Administrators and the Officials of the Health Department.

In-service education programs on matters relating to fungus, staphylococcus, viral and tuberculosis infections were held at Christmas and Easter. Public Health Nurses also attended a two day institute conducted by the Departments of Obstetrics and Paediatrics of the Faculty of Medicine, University of Manitoba.

Nine members of the Nursing Division attended the annual two week prenatal instructors institute at the University of Manitoba. Seventy-two percent of the nursing staff have now had special training as prenatal instructors.

During 1959, the orientation program for new staff nurses was reviewed and improved.

Observation and field experience in public health has been arranged for nurses attending the University of Manitoba, student nurses in Winnipeg Hospitals, and fourth year medical students.

DIVISION OF CHILD MEDICAL SERVICES

ACCIDENTS REVIEWED

Total number accidents reported by Principal and nurse 1,083

COMMUNICABLE DISEASES IN SCHOOL CHILDREN

	1958	1959
Total number of chickenpox	82	226
Total number of measles	147	684
Total number of mumps	61	12
Total number of scarlet fever	327	269
Total number of whooping cough	1	18
Total number of poliomyelitis	18	0

REPORT ON HEALTH INSPECTION OF SCHOOL CHILDREN BY PUBLIC HEALTH NURSES

Pupils examined in Health Service Rooms by nurses			22,848
Exclusion from school		4,719	
Miscellaneous	2,935		
Pediculosis	228		
Skin conditions	649		
Suspect communicable disease	907		
Treatments given		18,139	
Classroom Inspections by school nurse			2,644
General		2,492	
Acute Communicable		152	
Conference re pupil (with pupil, parent, teacher, etc.)			99,941
Health education			1,737
Home visits to school children made by nurses (exclusive of communicable disease visits)			9,483

PHYSICAL EXAMINATIONS OF SCHOOL CHILDREN

1. Children examined by medical examiners 6,597

2. Children with one or more defects 3,535

3. Parents invited to physical examination 4,513

4. Parents present at physical examination 2,360

DIVISION OF CHILD MEDICAL SERVICES

CHILDREN'S HOSPITAL - EYE CLINIC REPORT

Number of clinics held		184
Number of children examined: New	550	
Re-examined	578	1128
1. Refractions completed	786	
2. Refractions not completed	-	
3. Refractions not needed	27	
4. Returned for observation	315	
Completed Refractions		786
Not needing glasses	169	
Glasses prescribed	539	
No change in prescription	67	
Glasses discontinued	11	
Children found with 1/3 or less of normal vision with glasses		2
Out-patient consultations (Winnipeg Residents)		582
Referred to Orthoptic Clinic		61

AUDIOMETRY REPORT

Number of children tested		7911
First tests	6,403	
Re-tests	1,508	
Number of defects		315
Teachers and others tested		55

DIVISION OF PUBLIC HEALTH NURSING

Personal Services to Patients by Public Health Nurses
(Including visits and instruction by telephone from District Office)

Health:	Newborn	5,421
	Under 1 year	6,324
	Pre-school children	11,572
	School children	9,483
	Adults	10,969
Prenatal		889
Postnatal		5,147
Attendance at Prenatal Classes		3,364
Morbidity:	Tuberculosis	1,667
	Acute Communicable	269
Unclassified:	Not found	5,172
	Not taken under care	86
	Special activity	708
No. visits made for poison control prevention		212
	TOTAL	61,283

CHILDREN EXAMINED FOR FRESH AIR CAMPS

Camp Morton	146
Salvation Army	264
C.G.I.T.	163
Y.M.C.A.	180
Y.W.C.A.	191
Y.M.H.A.	543
United Church	459
Logan Neighbourhood House	102
Lakeside Camp	164

DIVISION OF PUBLIC HEALTH NURSING

Child Health Centres

No. of Child Health Centres		10
No. of Child Health Centre sessions held		507
No. of new babies admitted		1,511
Infants	1,145	
Pre-school	366	
Total attendance at sessions		27,921
Infants	9,873	
Pre-school	18,078	
No. of doctors' consultations and examinations		5,480
Infants	3,889	
Pre-school	1,581	
No. of home visits re child hygiene (birth registrations, etc.)		23,317
No. of immunizations by doctors at Child Health Centres		22,441

IMMUNIZATION
ATTENDANCE AT CHILD HEALTH CENTRES

Harrow	2,587 for 12 afternoons
St. Matthews	2,727 for 12 afternoons
St. Judes	2,947 for 12 afternoons
Sparling	1,331 for 13 afternoons
St. Andrews	2,784 for 13 afternoons
Holy Trinity	1,831 for 13 afternoons
Chalmers	1,815 for 13 afternoons
Mount Carmel	1,464 for 12 afternoons
Robertson House	3,039 for 13 afternoons
Stella Mission (January - August, 1959)	1,463 for 9 afternoons
McGregor (September - December, 1959)	453 for 4 afternoons
TOTAL	22,441 for 126 afternoons

VICTORIAN ORDER OF NURSES SERVICES SUMMARY FOR THE YEAR 1959

Total number of new cases	2,538	
Nursing Care Visits:		
Prenatal	-	
Postnatal	45	
Newborn	491	
Infant	217	
Pre-school	208	
School	241	
Adult	35,622	
Total Nursing Care Visits		36,824
Health Instruction Visits:		
Prenatal	13	
Postnatal	470	
Newborn	596	
Infant	659	
Pre-school	95	
School	48	
Adult	1,124	
Total Health Instruction visits		3,005
Not Seen		551
On behalf of patient		80
TOTAL		40,460

REGISTRY OF HANDICAPPED SCHOOL CHILDREN

The emphasis on recognition and assistance of school children with physical handicap continued during the year. Screening procedures for vision and hearing are being conducted with a high degree of efficiency, and there are very few unnecessary referrals as a result.

The following are some of the main points of interest in regard to physically handicapping conditions in Winnipeg School children:-

Registry:-

Renewed support was obtained from a Dominion-Provincial Health Grant to make possible expansion of the work of the Registry. This has made possible the maintenance of an up-to-date registry on children with diabetes, convulsive disorder, heart disease, vision and hearing defects.

Diabetes:-

There are 30 children in a school population of 50,000 who have diabetes. All are doing very well. This disease does not constitute a handicap as far as education is concerned so long as regular medical supervision is maintained.

Convulsive Disorder:-

The term "Epilepsy" has been removed from our record forms, and the term "Convulsive Disorder" substituted in order to improve the reporting by parents and physicians of children who have this problem. There are 61 such children in the school system. More than half are carrying on quite normally in school. The remainder are in special classes for slow learners, or in ungraded classes. One child with a severe problem has had to be withdrawn from school. Regular medical supervision is again an important factor in ensuring satisfactory school attendance and work. A very satisfactory liaison has been built up with private physicians through correspondence and this has led to real

benefit to the school child. A special Health Bulletin dealing with "Fits and Faints" was distributed to all school teachers and principals.

Vision Defects:-

Regular testing each year of all school children by the Snellen Chart has continued to be an efficient way of finding early those children who require glasses and whose school work would otherwise suffer. Children without private medical care have been seen at the Children's Hospital School Eye Clinic, and the co-operation of Miss Snell and Doctor Howard Reed and their staff of eye specialists is greatly appreciated.

There are now 35 children in 3 special classes for children with severe visual handicap. Every one of these children has been individually screened at 3 special conferences held during the year, and attended by their own physicians and representatives of the City Health Department, the School Board, and the Child Guidance Clinic. No child is recommended for special class, who is in the opinion of principal and teacher, progressing satisfactorily in an ordinary classroom. The improvement in these children who have been recommended for special class for the visually handicapped, has been most gratifying.

Hearing:-

Regular screening by Audiometry of all fourth grade pupils as well as any referred children has continued at a very satisfactory level of efficiency. Children with minor hearing defects are re-checked in one month before being referred to their doctor. This has greatly reduced the number who are so referred.

In addition, more and more kindergarten pupils are having audiometric examination in the hope of picking up serious hearing defects early in the child's school life. Twenty-six such defects were recognized in kindergarten children this last session.

Five hundred and thirty-seven children in ungraded classes were tested by audiometry. This was a most difficult group and great credit is due

to the Audiometer technician for this particular assignment. In future, all these children will be checked by the Child Guidance Clinic who are responsible for their placement in special classes in any event. All children with permanent hearing loss are referred to the Speech and Hearing Department of the Child Guidance Clinic, and their recommendations are followed as to special seating, hearing aids, and re-examination. Frequent contact between City Health nurse and parents has improved the regular medical care which these children often need.

Health Education:-

Articles dealing with poison prevention, convulsive disorders and nutrition were prepared and distributed to the schools by being included in the regular Bulletin of the Winnipeg School Board. A program designed to control the pattern of smoking habits in school children has been planned, and questionnaires are now being processed. A concerted effort will be launched in the fall of 1960 as part of the program of Health Education to try and influence children not to become habitual smokers.

Heart Disease:-

Six school children were operated upon successfully and more than 20 had special investigation to determine the nature of their heart problems. Approximately 100 school children who have had rheumatic fever in the past are being supplied with Penicillin tablets under a Health Grant to prevent recurrence of infection. Many children thought to have heart disease were shown to be completely well, and have been put back on full normal activity in the school. Continuous efforts are made, usually with success, to avoid unnecessary restriction with regard to P.T. and the co-operation of private physicians in this regard has been excellent.

In Service Training:-

Two special sessions were held for school physicians, with emphasis on psychometric testing and its interpretation, reading disabilities, and orthopedic problems. Representatives of the Nursing Divisions attended these classes as well.

The continuing study of virus diseases in the school population by Doctor John Davies and Professor J. Wilt, has furnished us and the medical profession as a whole with the beginning of a very useful monitoring system which keeps us aware at all times of the prevailing viruses which are epidemic in the community.

CHILD DENTAL SERVICES BRANCH

The aim of the Dental Division as part of the School Health Service is to have children leaving school with a minimum loss of permanent teeth, free of dental disease, trained in the care of their teeth, and a knowledge of oral hygiene. Adherence to basic principles of strict oral hygiene and regular dental supervision imposes upon the discipline of individuals and is highly unpopular. Education and acceptance of dental health principals and practices are generally lacking on the part of the child, parent and teacher. Considerable long term planning is necessary in order to remedy this situation.

The present program is designed to utilize facilities and funds to the best advantage and at the same time prepare for future expansion with the development of interest and demand. There are three main categories of interest to the Division - that of Dental Health Education, Studies of the problems of Dental Health, and Dental Treatment.

Dental Health Education

The Dental Division is attempting to increase the awareness of the public of the importance of early child dental care and the need for periodic evaluation of the child's dental health. Approximately one out of every eight persons in our society is a child under six years of age. School dental examination and notification of advisability of consulting the family dentist is one of the values of regular school dental examination clinics. This helps to motivate some parents and stimulates an interest on the part of the teachers. Coinciding with this, the dental examining team gave classroom demonstrations on tooth brushing technique using plaster models of the upper and lower dentition. On completion of the demonstration the tooth brush and models, plus a pamphlet on tooth brushing technique and a booklet prepared by the Division on suggested aids to prevent tooth decay, were left with each teacher. It is hoped that by providing each teacher with basic instruction equipment this will provide material for later dental health lessons.

Dental Health Week proclaimed for October 24th - 31st, 1959 was also used in promoting further dental health education. The program for this year included a poster and essay contest on dental health.

Chairside instruction to the parent and qualifying child by the staff dentist on the responsibility of the family in maintaining oral health, patient and parent co-operation during dental treatment, appreciation of the free service offered and motivating the parents into an interest in their children's dental well-being is also part of the program. Indigent families are encouraged to take advantage of regular supervision as provided, with the hope that the children will continue the plan in later life. A recall service is also provided for the children dentally completed to the date of their last appointment.

Periodic in-service training days were held for all the staff of the Dental Division to provide time for special lectures and instruction in dentistry and on allied services in the public health field. The Health Department sponsored two dental assistants in attending the new course available at the University of Manitoba's Dental College (one evening a week during the winter months) which gives successful candidates certification as Dental Assistants.

Dental consultant service was offered to some of the social agencies in the City and lecturers were provided for organizations requesting talks on dentistry.

School Dental Examinations

School dental examinations included children in Kindergarten, Grade I and Grade II with a total of 11,093 children being examined. Notification of dental requirements were sent home with the children, as well as a questionnaire to the parents of Kindergarten and Grade I requesting information as to whether they were under dental supervision or required assistance under the City's indigent dental clinic service. The 1959 school dental examinations represent all Nursing Districts and include all the primary schools in Winnipeg School District No. 1. In 1957 a random sample of 22 schools in District No. 1 showed 19% of Grade I children eligible for City Dental Service. The 1959 survey shows a figure of 22% based on the entire Grade I population available for examination at the time the examining team visited a school. (4,642 Grade I children attended classes in School District No. 1 as at December 31, 1959).

Table I

School Dental Inspections

(number of children)

Grade	Examined		No Noticeable Caries		Attending Dentist		Request Treatment		Nurses' Approval	
	1958	1959	1958	1959	1958	1959	1958	1959	1958	1959
Kindergarten	1438	2682	389	680	985	1907	296	423	275	346
Grade I	2479	4409	464	887	1563	3359	791	1084	692	961
Grade II	1395	4002	190	718						
Total	5312	11,093	1043	2285	2548	5266	1087	1507	967	1307

Definition of Criteria

No noticeable caries - caries treatment completed or never needed

Attending Dentist - no caries defects or reply to questionnaire by the parent that the child has a family dentist, not necessarily having all dental work completed.

Request Treatment - response to questionnaire by parent.

Approval for Treatment - school nurse screens children and approves if family is indigent.

Staff

The Division's staff includes a full time Director, two full time dentists, eight part-time dentists, three dental assistants (includes a Registered Nurse and a Practical Nurse), three clerks, and dental aides as required. The total dentist establishment allows for the equivalent of four and a half full time dentists.

Clinics

2 chairs - School Board Office Building

2 chairs - William Whyte School

2 Mobile Units - servicing David Livingstone and Norquay Schools

101 Dental examination clinics

Two permanent fully equipped dental clinics are maintained to provide dental treatment throughout the year. The School Board Office Building Clinic offers an emergency and priority treatment service available during the school week for the nurses and principals to refer cases for immediate attention. The mobile units are moved into suitable space in schools where a known concentration of indigent children attend.

Dental Treatment

Residence, economic status, age and grade are considered in determining eligibility for admission to obtain dental treatment under the Health Department's dental treatment plan. Applicants must be residents of the City of Winnipeg or recipients of social welfare from the City. Dental emergencies (relief of pain and infection) are given priority and include all children up to and including the age of 16 years. All children on Social Welfare applying for dental treatment are given comprehensive coverage to the extent of facilities available and provided by the clinics. An incremental dental care plan follows for indigent children from pre-schoolers to Grade I in providing comprehensive dental treatment. The demands on the service far exceed the present resources and necessitates a definite service policy in order to obtain a maximum of improved dental health returns. As funds, location, personnel and dental public health measures become available succeeding ages and grades will be included on an incremental basis. An attempt to maintain the benefits of retaining healthy mouths of interested patients once they are made dentally fit was introduced in August by beginning a periodic recall system. During the five month period to the end of the year 415 children were recalled and of these 140 were returned to optimum dental health on their first appointment. As of December, 1959, 345 Social Welfare patients were on current files receiving dental coverage.

Table II

Summary of Dental Treatment Groups

(number of children)

	PreSchool	Kindergarten	Grade I	Grade II	Older Ages	Total
No. Patients	136	422	896	386	1056	2896
No. Completions	68	179	417	229	217	1110
No. Recalls (6-8 months)	11	19	146	171	68	415
No. Recalls Completed 1st Visit	8/ 73%	9/47%	48/32%	52/31%	23/34%	140

During the year 2,896 children were treated in the course of 6,925 clinic attendances. Of the number, 1,110 patients received a complete dental caries care. Fifty percent of the number of children attending the clinic this year (not including older age welfare cases) are contained in the proposed plan for comprehensive treatment coverage.

Including Grade II patients, which represent for the most part a start on the incremental treatment plan and a follow-up on patients accepted for treatment during their Grade I term, would increase this figure to sixty-three percent (63%). Eighty percent (80%) of the children completed to the date of their last appointment and to the extent of treatment facilities offered by the clinics are in the group up to Grade II. Unfortunately the demands on the clinics are such that only 38% (37% in 1958) of the children attending were dentally completed to the date of their last appointment.

The provision of Dental treatment for mentally and physically handicapped children in the City is most unsatisfactory. The Dental Division extended dental treatment coverage to include handicapped indigent children, but facilities and convenience of treating these children are not adequate. The need of providing suitable dental services for all handicapped children is a concern of the Division with steps being taken to stimulate an interest in this problem.

Table III

Analysis of Clinical Services provided by City of Winnipeg Health Department

X-rays (single films)	993
Extractions - Deciduous teeth	1602
Permanent teeth	542
Anaesthetic (local)	5609
Fillings - Amalgam - single surface	4417
multiple surface	4252
Plastic or synthetic	270
Cement linings	7239
Cement fillings	546
Crowns - Celluloid	11
Stainless steel	94
Space maintainers	44
Prosthetic appliances	10
Other treatments	841
Prophylaxis	419
Endodontic treatment	137
Refused appointments (non-co-operative)	136
Cancelled appointments	229
Failed appointments	447
Referred to private practitioners	68
Recalls (6 - 8 months)	415
No. of dentist 3 hour sessions (includes time spent in school inspections)	2117

Table IV

Distribution of Dental Indigents based on 1958-59
Study of Grade I Children

Nursing District	Number of Examinations	% Nurses' Approval	Number of Schools
West	1053	17%	15
South	1180	8%	20
East	878	34%	16
North	1234	32%	15

The geographic area of the City of Winnipeg showing the heaviest concentration of dental indigents includes most of the elementary schools within the boundaries of Keewatin Street, Notre Dame Avenue and the Red River (north). There are also two isolated areas which are not within these boundaries. The operative clinics are well located to service the needed areas; further expansion of the dental treatment program should be confined to the North and East Nursing Districts for the time being.

Summary

The objective of the Dental Division is to encourage adequate oral health service to children of the community. Dental health education and its application are important in maintaining healthy children. Early child dental care and supervision is important with periodic evaluations being made of children's dental health. Indigent children are provided with the opportunity of free dental treatment based on a plan to eventually give larger numbers of these children comprehensive dental treatment. The problems of treating oral manifestations in the indigent, crippled and handicapped child is of concern to the Division.

The school dental program is being developed to include all aspects of dental public health and to assist in solving the tremendous problem of improving oral health of children residing in the community.

INSPECTIONS BRANCH

Dairy	Principal Inspector	R. Bentham	Cert. R. San. I
Food	" "	R.C. Morrow	D.V.M., C.S.I.(C)
Housing	" "	G.W. Kelly	Cert.R.San. I, C.S.I.(C)
Sanitation & Hygiene	" "	A. Cross	M.R.S.H., C.S.I. (C)
Laboratory	Senior Technician	H. Robinson	Cert. R. San. I
Chief Health Inspector		E.J. Rigby	D.V.M., B.S.A., C.S.I.(C)

HOUSING DIVISION:

Reference to the detailed report of the Housing Division will reveal that a considerable number of defects in housing conditions were remedied under orders from the Health Department. The lack of adequate housing accommodation for large families in the low income group remains a major problem and greatly impedes efforts to improve housing conditions in the City. The Urban Renewal and Rehabilitation Board after a number of studies made reports and recommendations to the City Council outlining proposals for the renewal or rehabilitation of areas with a preponderance of substandard dwelling units. The implementation of these recommendations should be of considerable help in improving housing conditions for a large number of people in Winnipeg.

During the year, recommendations were made to the Minister of Health suggesting that regulations respecting housing be amended so as to make them more effective. These recommendations received favorable consideration so probably a number of the requested amendments will be enacted.

Welfare Institutions, hotels and lodging houses were given more frequent inspections during the year to ensure compliance with the various regulations respecting them.

DIVISION OF SANITATION AND HYGIENE:

The personnel of this Division makes routine inspection of offices, workshops, and factories; swimming pools; schools; comfort stations; and 350 licensed premises including billiard parlors, laundries, massage parlors, second hand premises, etc. In addition this Division inspects and reports on garbage and refuse conditions in yards, vacant lots, streets and lanes; on temporary surface closets for workmen; on noises; on smoke, fumes, dust and offensive odours; on infestation of insects and rodents; and on pigeons and poultry. The Division collects water samples for bacteriological analysis.

During the months of July and August an intensive study was made of 35 wading pools to establish if the present type of wading pool presented a health hazard. During the study 130 water samples were taken to the provincial Bacteriological Laboratory for analysis. An attempt was made to keep several pools with a chlorine residual of 0.5 parts per million and at the same time several other

pools were kept as controls. The results of the study were that wading pools in their present form are being discontinued and that before the pools are opened next year, each pool will be altered to a circulating pool with some form of efficient chlorination.

To ensure the safety of our drinking water the Division collects, at strategic points throughout the City, an average of 40 samples weekly for bacteriological analysis.

Considerable annoyance and nuisance was experienced during the year from smoke and offensive odours from the burning of refuse in outside incinerators. The matter was brought to the attention of the Committee on Public Health & Welfare by the Medical Health Officer with the result that on the 30th of November the City Council passed a by-law forbidding the use of outside incinerators and limiting the future installation of inside incinerators to the multiple chamber type. This by-law becomes effective on January 1, 1960.

In late October 1958 by-law No. 18104 was passed. This by-law amended by-law No. 4274 (The Health By-law) with regard to more effective control of temporary surface closets and some very unsatisfactory conditions in connection with temporary surface closets were corrected during the past year.

As in the previous year, one inspector from the Division was granted permission to shoot pigeons that were becoming a nuisance. During the year an effort was made to control the pigeon population in and around the bridges that cross our two rivers and also around the bridges that cross railroad tracks. In all, some 3764 pigeons were shot, including over 700 pigeons around the bridges.

Some good work was done in the field of air polution. Two large firms had some very expensive equipment installed to control the emission of dust from their plants. Routine inspections in factories and workshops continue to have effect and conditions regarding light and ventilation and heating are improving.

The personnel of the Division includes one principal inspector, one grade 3 inspector and six grade 2 inspectors. These inspectors made a total of 18,544 inspections and re-inspections and dealt with 6274 defects requiring 6118 notices. In addition the staff collected 1971 water samples.

DAIRY DIVISION

Adverse weather conditions during the spring, summer and fall of 1959 were responsible for a decrease in both the quantity and quality of feed available for dairy cattle in the shed supplying milk to Greater Winnipeg. In spite of adverse conditions, an adequate supply of good quality milk was maintained throughout the year.

The report of the Milk Control Board reveals that while there was an increase of over a million pounds of milk sold by plants licensed to sell milk in Winnipeg, there was a decrease in the number of producers shipping milk to the pasteurization plants. This trend to fewer, though larger, producers has been brought about to some extent by the introduction of bulk tank storage and transportation of the raw milk. Inspectors of the division have maintained close supervision over the installation of bulk tanks to ensure the quality of the milk

INSPECTIONS BRANCH (CONT'D)

will be maintained if not improved by such installations. Rather stringent rules have had to be insisted on to ensure that suitable facilities exist for the washing and sanitizing of the tanks and that the milk is kept at a suitable temperature.

The quality of milk, cream and other dairy products continues to show improvement so that now they comply with recognized standards for Grade A milk. All milk and cream sold in the city is pasteurized and a close check is maintained to ensure that the pasteurization process has been carried out properly. No milk borne disease was reported during the year.

The Federal Department of Agriculture under their Brucellosis control policy, tested most of the cattle population in the area. Animals found to be infected with Brucellosis were slaughtered under supervision. It is anticipated that the incidence of the disease can be reduced to a very low figure as already has been done with bovine tuberculosis.

FOOD DIVISION

Restaurant inspections, a major activity of the Food Division, show a yearly increase, due to the ever increasing number of people patronizing restaurants and increase in the number of restaurants. Larger and more elaborate dining establishments are being built each year.

Since the Manitoba Liquor Act was amended in 1957 to provide for additional liquor outlets, numerous premises have been either built or altered to comply with the requirements of the Act for the serving of food and alcoholic beverages. At the present time, there are 34 dining rooms licensed to serve liquor, 25 cocktail bars and 5 cabarets serving liquor. In addition, there are 11 club dining rooms and 11 club cocktail bars licensed to serve liquor to club members and guests. Further, there are 21 restaurants and 9 beverage rooms licensed to serve beer and wine to the public. In addition to these there are 48 beer parlors provided for male patrons alone. There has been a considerable increase in the number of halls used for functions such as socials, wedding receptions, etc., for which an occasional liquor permit is required. Inspectors from the health department have co-operated closely with other departments and the Liquor Control Commission to ensure that all premises where liquor is served comply with the requirements for such premises.

Renovations, in some instances at considerable expense, have been carried out in processing plants, such as bakeries and sausage manufacturers. Sanitary conditions in such premises continue to show improvement and generally are of high standard.

Inspectors of the Food Division are frequently consulted by operators of food premises to ensure that approved sanitary methods are being followed and that renovations will result in premises being easier to maintain in a suitable sanitary condition. This indicates the very satisfactory measure of co-operation existing between the general public and inspectors of the food division.

E.J.Rigby, D.V.M.,
CHIEF HEALTH INSPECTOR.

INSPECTIONS BRANCH

FOOD DIVISION

Annual Report (Jan. - Dec.) 1959

	INSPECTIONS.	CONTACTS.
Abattoirs	1	4
Bakeries	436	49
Banquet Halls	99	66
Beer Parlors	252	55
Breweries & Bottling Plants	14	22
Candy Manufacturers	47	10
Canteens & Hotel Kitchens	148	33
Caterers	179	44
Cereal Mills	3	13
Cocktail Lounges	37	24
Dance Halls	95	11
Egg & Poultry Wholesale	3	
Fish-filleting, cold storage etc.	32	17
Frozen Food Locker Plants.	33	10
Ice Houses and Depots	7	1
Pickle & Vinegar factories	19	9
Poultry Slaughterhouses	37	19
Private Clubs	25	10
Producers' markets, vegetable stalls	58	15
Restaurants	4555	903
Retail Food stores, grocers, butchers etc.	3595	525
Sausage Manufacturers	134	121
Wholesale, groceries and vegetables	158	54
Fires in Food premises	32	34
Vehicles	57	1
Vending Machines	63	
Special Calls	359	18
TOTAL	10,478	2,068

Complaints -------- 332

Notices - Written ---- 518
Verbal ------- 4,776

Samples examined ---Food -- 353

Plans examined -------- 95   Plans approved -------- 66

Swab Tests -----------304   Food Poisoning -------- 2 Contacts --14.

Condemnations

Meat	2,822 lbs.	Fish	1,532 lbs.
Baked Goods	31 lbs.	Biscuits	420 lbs.
Jello	250 lbs.	Candy	124 lbs.
Poultry	90 lbs.	Salt	290 lbs.
Vegetables & Fruits	758 lbs.	Sugar	1,500 lbs.
Canned Goods	319 lbs.	Cereal	1,848 lbs.
Dairy Products	139 lbs.		

INSPECTIONS BRANCH

DAIRY DIVISION

January to December - 1959

			INSPECTIONS	CONTACTS
COUNTRY:	Milk Producers		3,620	1,113
	Prospective Producers		161	26
	Milk Haulers		449	---
CITY:	Pasteurization Plants (9 Licensed)		220	2,503
	Ice Cream Manufacturers		391	
	Counter Freezers		645	
	Butter Plants		252	
	Cheese Plants		225	
	Vehicles - Delivery		81	
	Cans Inspected		12,720	
SAMPLES TAKEN:	Water	59		
	Milk Retail	1,509		
	Milk Shippers	25,820		
	Cream	557		
	Ice Cream	676		
	Bottles for Sterility	69		
	Special Samples	985		
GENERAL:	Special Calls	1,174		
	Permits Issued	32		
	Cancellations	63		
	Complaints	34		
	Cans Rejected	997		
	Temperatures Taken	6,264		
	Samples Tested	2,071		
	Letters Sent Re: Premises	1,430		
	Notices Sent Re: Quality of Milk	6,906		
	Notices Sent Re: Poor Cans	490		

INSPECTIONS BRANCH

BACTERIOLOGICAL LABORATORY

January - December - 1959

WATER ANALYSIS	Standard Plate Count	2,794
	Presumptive Test	2,794
	Confirmed Test	733
MILK & CREAM	Standard Plate Count	2,121
	Babcock Test	2,023
	Coliform Test	2,130
	Phosphatase Test	2,119
	Resazurin Test	27,886
ICE CREAM	Standard Plate Count	566
	Coliform Test	687
MILK BOTTLES	Bacterial Test	69
DIAGNOSTIC	Diphtheria Swabs	313
	Urinalysis	312
TOTAL TESTS		44,547

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INSPECTIONS BRANCH

HOUSING DIVISION

ANNUAL REPORT -1959

Inspections and re-inspections - 7,513

Complaints attended to - 1,627; Lack of heat - 436; Other complaints - 1,191

Notices Issued: Verbal warnings - 2,707; Formal Notices - 1,730.

Renovations ordered under penalty of closing up: Dwellings - 40.

Premises Placarded "Unsanitary": Houses - 37; Attics - 23; Cellars - 9.

Violations or defects remedied during the year under orders from the Division

Overcrowding remedied: 111 families
Damp or dark cellars vacated: 18 cellars
Unsatisfactory attics vacated: 50 attics
Dirty buildings cleansed throughout: 201 buildings
Fly screens and/or storm sash provided: 138 buildings
Bed bugs exterminated: 91 buildings
Cockroaches exterminated: 55 buildings
Rats or mice exterminated: 63 residential properties
Defective plumbing repaired: 194 buildings
Additional plumbing installed to comply with rooming house regulations: 281 rooming houses
Hot water provided: 88 buildings
Walls, ceilings, floors repaired: 215 buildings
Redecorated: 258 buildings
Leaky roof repaired: 50 building
Defective eavestroughing renewed: 63 buildings
Sufficient heat provided: 327 buildings
Defective cellars repaired: 55 cellars
Defective heating equipment renewed: 74 buildings
Gas stoves removed from bedrooms: 102 rooming houses
Floor covering renewed: 106 buildings
Miscellaneous defects remedied: 446 buildings

Police Court Summonses issued - 27

Roominghouse Regulations	8
Heating By-law	5
Refusal of entry to health inspector	2
Failure of tenant to vacate condemned house	2
Removed placard from condemned cellar room without permission	2
Owner rented out condemned cellar room	1
Owner rented out condemned attic	1
Bed bug infestation	1
Defective roof	1
Defective furnace	1
Lack of fly screens	1
Overcrowded room in nursing home	1
Water supply shut off	1
	27

Convictions	20
Dismissals	1
Withdrawals	6
	27

Total fines, including costs of Court - $319.40

George W. Kelly,
Principal Inspector,
Housing Division.

INSPECTIONS BRANCH

DIVISION OF SANITATION AND HYGIENE

ANNUAL REPORT - 1959

Licensed:

	Inspections
Billiard Parlors	137
Bowling Alleys	45
Dog Kennels	11
Hatcheries & Pet Shops	67
Junk Yards	88
Laundries	111
Massage Premises	114
Poultry Keepers	13
Second-hand Stores	331
Skating Rinks	15
Soap Manufacturing	4
Stables - Board,Feed and sale	13
Tanneries and Hide Curing	11
Undertaking Parlors	17
TOTAL	977

Unlicensed:

OFFICES, WORKSHOPS & FACTORIES	7,279
Comfort Stations	94
Community Clubs	3
Garbage and Refuse	2,741
Lanes, Streets, Yards & Vacant lots	2,723
Outbuildings	3
Schools	10
Swimming Pools	498
Wading Pools	224
Wells	21
Workmen's Closets	2,632
Miscellaneous	1,339
TOTAL	10,288

Total number of inspections	18,544
Interviews	2,287
Estimated value of repairs	$140,724.80.
Prosecutions	9
Complaints	1,257

Notices:	
Verbal	5,327
Letter	214
Informal	425
Specification	35
Mandatory	117

Water Samples	1,971
Deliveries	574

INSPECTIONS BRANCH
DIVISION OF SANITATION & HYGIENE
Annual Report - 1959
(Cont'd)

Defects discovered and dealt with:

Bedding and Upholstery	20
Cleanliness, lack of	420
Common Drinking Cups	136
Covered Waste Receptacles	51
Dampness	4
Drinking Facilities (water)	20
Garbage and Refuse	1,842
Gas Installations	0
Heating: Lack of	115
" Furnaces and Equipment	1
" Chimneys, ducts and piping	0
Lanes, streets, yards and vacant lots	1,566
Lighting: Artificial or Natural	24
Noises	28
Overcrowding	1
Plumbing: Lack of	14
" Defective	89
" Illegally Installed	26
" Insufficient	64
" Dirty Fixtures	159
" Lack of legible signs	57
" No water supply	15
" No hot water	15
Pigeons or Poultry, illegal	56
Privacy, Lack of	6
Rest Rooms: Lack of	5
" " Dirty	4
" " Furnishings	12
" " Matron, lack of	0
Rodents: rats	88
" mice, other	14
Smoke, dust, fumes, odours	470
Soap and towels, lack of	50
Stagnant water	3
Structural defects: Roofs and ceilings	65
" " Eavestroughing and R.W.L.	4
" " Cellars, floors, walls	45
" " Screen doors and windows	6
" " Storm doors and windows	3
Swimming Pools, Wading Pools	101
Unlawful Occupation	10
Ventilation	63
Vermin	50
Workmen's Closets	262
Miscellaneous	290
Total defects and irregularities	6,274

A.Cross,
Principal Inspector,
Sanitation & Hygiene.

CITY HEALTH DEPARTMENT

Summary of Expenditures, 1959
(to nearest dollar)

(a)	Personal Services	$411,050.00
(b)	Outside Services	81,118.00
(c)	Materials, Supplies and Repairs . . .	71,350.00
(d)	Equipment, additions & replacements .	2,350.00
(e)	Fuel, water, light and power	101.00
(f)	Other expenses	1,150.00
(h)	Automobile Expense.	15,836.00
		$582,955.00

Expenditures by Branches, 1959
(to nearest dollar)

	Service	Total	Personal	Other
1-1	Administration & Statistics	$ 30,672.00	$ 27,559.00	$ 3,113.00
1-2	Communicable & Other Diseases	114,103.00	37,002.00	77,101.00
1-3	Inspection Services & Laboratory. . .	119,896.00	106,632.00	13,264.00
1-4	Child Medical Services.	35,867.00	4,014.00	31,853.00
1-5	Child Dental Services	61,324.00	27,097.00	34,227.00
1-6	Public Health Nursing	209,758.00	198,786.00	10,972.00
1-7	National Health Grants (City's Share)	11,335.00	9,960.00	1,375.00
	Total	$582,955.00	$411,050.00	$171,905.00

Gross Cost per Capita $2.26

CITY HEALTH DEPARTMENT

Projects under National Health Grants

Summary of Expenditures, 1959
(to nearest dollar)

(a)	Personal Services	$74,866.00
(b)	Outside Services	4,140.00
(c)	Materials, Supplies & Repairs	1,479.00
(d)	Equipment, Additions & Replacements . .	7,568.00
(h)	Automobile Expenses	3,479.00
		$92,532.00
	Less Cost to City of Winnipeg	11,335.00
	Revenue from National Health Grants	$81,197.00

Expenditure by Projects, 1959
(to nearest dollar)

	Service	Total	Personal	Other
C1-7(1)	Dental Services	$ 7,661.00	-	$7,661.00
C1-7(2)	Registry for Handicapped Children .	4,535.00	$ 1,512.00	3,023.00
C1-7(3)	Assistance to Health Services. . . . Health Inspections	60,950.00	55,781.00	5,169.00
C1-7(4)	Assistance to Health Services . . . Nursing Services	19,386.00	18,573.00	813.00
	Total	$92,532.00	$75,866.00	$16,666.00
	Less Cost to City of Winnipeg	$11,335.00	$ 9,960.00	$ 1,375.00
	Total	$81,197.00	$65,906.00	$15,291.00